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Title: DETACHABLE SURGICAL

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Examiner: THOMAS, David B.

RATCHET

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Art Unit .: 3723

Applicant: LECHOT, André

Atty Docket No.: PUS-P001-037

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Dear Sirs:

Attached please find a Fee(s) Transmittal Form for the above-identified application.

Authorization is hereby given to charge the required LARGE ENTITY fees, or credit any overpayment to our deposit account No. 50-2621.

Respectfully submitted.

Datc: 31 August 2009

Encl: - Fee(s) Transmittal Form

ohà MOETTELI .S. Rcg. No. 35,289